

What Is Happening to Sponsored Training for Nurses?

By DONNA PEARCE, B.S., R.N.

IT IS ESSENTIAL that the professional competency of health workers keep pace with the expanding scope and increasing complexity of modern public health if a high quality of public health practice is to be maintained. Recognizing this principle, the authors of the Social Security Act of 1935 included among its purposes provision for the training of public health personnel. In the early years of the program authorized by this act, designated amounts of money were allotted to States for the specific purpose of developing qualified professional and technical personnel. Later, the State health departments allocated to training whatever amounts from Federal funds they deemed appropriate. In addition, limited funds from State and local appropriations have been used for training purposes. Such training, financially supported in whole or in part from Federal, State, and local health funds, has come to be known as sponsored training.

Nurses, representing the largest single group of professional workers in health departments, have figured prominently as recipients of sponsored training. Of the 6,674 trainees who were sponsored for academic study in public health

during the years 1936 through 1944, 4,032 (60 percent) were nurses (1).

Federal grants-in-aid for health work reached their peak in fiscal year 1951. For grant-in-aid funds administered by the Public Health Service, the peak year was fiscal 1950; after that year, there was a rapid decline each year through fiscal 1954 (2). With this decline in Federal grants, there has been a growing professional concern as to the status of the sponsored training program. Because of this concern, an attempt has been made to find out what is happening to sponsored training for nurses.

For this study, data for an 8-year period, fiscal years 1947 through 1954, were analyzed. Data on the number of nurses who had received sponsored training during each fiscal year 1947 through 1952 had previously been obtained by the Division of State Grants, Public Health Service. For fiscal years 1953 and 1954, comparable data were obtained by the Public Health Service regional consultants through visits and correspondence with State health departments. (In this report, the term "State" includes the District of Columbia, Alaska, Hawaii, Puerto Rico, and the Virgin Islands.)

The data cover all full-time accredited training for periods varying in length from "less than 6 weeks" to 12 months. Accredited training refers to study for which academic credit is granted by a school of public health or by a university or college offering a public health

Miss Pearce is assistant chief of Public Health Nursing Services, Division of General Health Services, Public Health Service. She has been with the Public Health Service since 1936.

Table 1. Number and percentage of nurses trained, by length of training period, and number of States participating in sponsored training for nurses, fiscal years 1947-54

Fiscal year	Nurses trained, by length of training period								Number of States participating
	Total		Less than 6 weeks		6 weeks to 6 months		7 to 12 months		
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	
Total.....	6, 194	100. 0	1, 367	22. 7	3, 203	53. 3	1, 446	24. 0	53
1947.....	608	100. 0	63	10. 4	411	67. 6	134	22. 0	45
1948.....	¹ 1, 005	² 100. 0	351	42. 4	367	44. 4	109	13. 2	45
1949.....	1, 490	100. 0	269	18. 0	943	63. 3	278	18. 7	49
1950.....	1, 185	100. 0	225	19. 0	712	60. 9	248	20. 1	47
1951.....	689	100. 0	160	23. 2	280	40. 7	249	36. 1	47
1952.....	500	100. 0	140	28. 0	214	42. 8	146	29. 2	45
1953.....	411	100. 0	106	25. 8	147	35. 8	158	38. 4	45
1954.....	306	100. 0	53	17. 3	129	42. 1	124	40. 6	41

¹ Length of training not specified for 178 nurses. ² 100 percent=827.

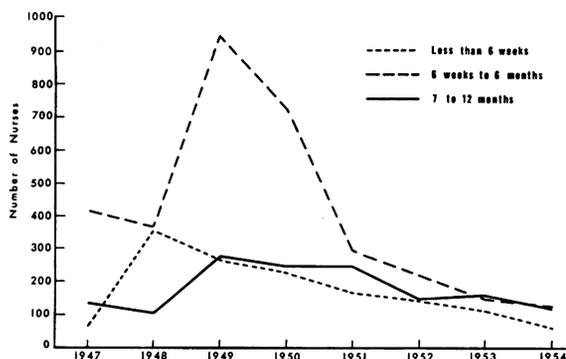
nursing program of study approved by the National League for Nursing.

The Trends

A total of 6,194 nurses received training during the 8-year period, as shown in table 1. This figure, however, does not necessarily represent the number of individual nurses, since some nurses may have received more than one period of training. For example, California has reported that 29 nurses received stipends for more than one type of accredited training during a 16-year period (3).

The peak year for sponsored training, in terms of both the number of nurses trained

Number of nurses who received sponsored public health training, by length of training period, 1947-54



and the number of States that sponsored training, was 1949 (see table 1 and chart). Each year since that date, there has been a steady decline in the number of nurses receiving training. From the year 1951 to the year 1954, there was a marked decrease.

The largest percentage (53.3) of the nurses received training for 6 weeks to 6 months. However, the percentage of those sponsored for 7 months to 12 months increased in both the years 1953 and 1954.

Of the 53 States, only 4 failed to sponsor training in 1949. In 1954, this number had grown to 12.

Table 2 shows that there was a widely varying range among the States in the number of nurses trained. Two States trained 32.8 percent of all the nurses, whereas 27 States trained only 10.8 percent. A review of the figures for individual States confirms the expectation that, in general, those with large metropolitan areas employing large numbers of nurses were the ones which trained the greater number of nurses. Massachusetts, with 1,082 trainees, and New York, with 984, were the two States that trained 400 or more nurses. All of the 18 States with a population of less than 1 million are included in the group that trained less than 50 nurses. And of the other 9 States in the less-than-50 group, 6 had populations of 1 to 3 million and 3 had between 3 and 4 million.

In interpreting the figures for number of nurses trained, however, variations in the proportion of long-term training periods to short-term periods must be considered. For example, of the 1,082 trainees in Massachusetts, only 16 received training for 7 to 12 months, whereas, of New York's 984 trainees, 426 received training for this length of time. California and North Carolina afford another example. Both of these States fell into the 100-399 category, but California reported that 104 of its 285 trainees received 7 to 12 months' training, whereas North Carolina had only 55 of a total of 296 trainees in this group.

Further analysis of the data for fiscal years 1953 and 1954 shows that 35 States sponsored training for periods of 7 to 12 months in 1953, whereas only 23 sponsored that type of training in 1954. One hundred fifty-eight nurses received training for 7 to 12 months in 1953, and 124, in 1954.

The Problem

The data presented show that since 1949 there has been a steady decrease in sponsored training for nurses in the United States as a whole, though not necessarily in every State. This decrease is a matter of real concern in view of the need for a continuation and expansion of training. According to the Public Health Service's 1955 census of public health nurses, only 42.2 percent of the nurses employed in State and local official health agencies on Jan-

Table 2. Number of States and number and percentage of nurses trained according to the range in number of nurses who received sponsored training, fiscal years 1947-54

Range in number of nurses	Number of States within range	Nurses who received sponsored training	
		Number	Percent
Total	53	6, 194	100. 0
400 or more.....	1 ²	2, 030	32. 8
100-399.....	12	2, 557	41. 3
50-99.....	12	938	15. 1
Less than 50.....	27	669	10. 8

¹ Numbers of nurses trained by these States were 984 and 1,082.

Table 3. Number and percentage of nurses in State and local official health agencies who have had approved public health nursing education, 5-year intervals, 1940-55

Year	Number nurses employed	Nurses with 1 year or more of public health nursing education		Rate of increase in percentage
		Number	Percent	
1940.....	9, 347	2, 151	23. 0	-----
1945.....	11, 414	3, 395	29. 7	29. 1
1950.....	13, 594	5, 064	37. 2	25. 2
1955.....	14, 152	5, 969	42. 2	13. 4

uary 1 had had 1 year or more of public health nursing education.

Although there has been a decrease in Federal funds for training, these funds are not the only means of providing adequate training for public health nurses. The number of collegiate schools offering educational programs for the preparation of nurses for beginning positions in public health increased from 3 in 1947 to 33 in 1956 (4, 5). A few States are exploring the use of extension courses from universities with approved public health nursing programs as a means of improving the training level of currently employed nurses. Also, two States have obtained funds from their legislatures for the training of a limited number of public health nursing personnel, and still others plan to request such funds. In the 24 States in which universities with approved programs of study in public health nursing are located, nurses may be able to pursue their studies on a part-time basis. Greater efforts along these lines, particularly the use of extension courses, should help to offset the lag in sponsored training. However, still other methods of preparing nurses for public health work may have to be worked out.

The effect of the decline in sponsored training on the qualifications of nurses employed for public health work is not readily apparent, but a few facts that may be indicative can be cited. The percentage of nurses in State and local public health agencies who have had 1 year or more of public health nursing education was greater on January 1, 1955, (42.2 percent) than it was 2 years earlier (40.5 percent). However,

a comparison of the figures for 5-year intervals since 1940, in table 3, shows a definite deceleration in the rate of increase in the percentage of nurses with 1 year or more of public health nursing education.

Summary and Conclusions

Data for an 8-year period, fiscal years 1947 through 1954, show a steady decrease in the number of nurses receiving sponsored full-time accredited training since 1949. The decrease is more marked for the years 1951 through 1954 than for 1949 and 1950. Although the numbers of nurses trained were smaller in 1953 and 1954 than in previous years, the percentage of long-term (7 to 12 months) training periods increased in both years.

The number of States not sponsoring any training for nurses has increased since 1949. In 1949, 4 States did not sponsor training, and in 1954, 12 did not.

As might be expected, there was a wide variation among the States in the number of nurses trained. Twenty-seven States each sponsored less than 50 trainees. Two States each sponsored 900 or more.

The States are making some effort to make up the loss of Federal funds through State appropriations and through use of extension

courses from universities. The increase in the number of collegiate basic nursing schools approved for the preparation of nurses for beginning positions in public health nursing is another encouraging sign.

However, the decided slowing up in the rate of increase in the percentage of qualified nurses employed by State and local official agencies indicates that greater efforts will have to be made to offset the lag in sponsored training. In addition, ways must be found to extend and intensify training efforts at a rate consistent with the need to overcome present deficiencies and to meet future demands.

REFERENCES

- (1) Mountin, J. W., and Hankla, E. K.: Training public health workers. *Pub. Health Rep.* 61: 725-749, May 24, 1946.
- (2) Haldeman, J. C.: Financing local health services. *Am. J. Pub. Health* 45: 968-969, August 1955.
- (3) Haig, R., MacKenzie, C., and Laughlin, M. E.: Recipients of stipends for training in public health nursing. *Pub. Health Rep.* 69: 899-906, October 1954.
- (4) Connor, M. C.: Public health nursing education, 1940-1947. *Pub. Health Nursing* 40: 123-127, March 1948.
- (5) Educational programs in nursing accredited by the National League for Nursing, 1956. *Nursing Outlook* 4: 112-119, February 1956.

OVR Appoints Advisers on Training Policy

The Office of Vocational Rehabilitation has appointed an Advisory Committee on Training Policy to help solve the nationwide shortage of persons trained to work with the handicapped.

The training program was established by Public Law 565, 83d Congress, in 1954 to increase the available supply of professional personnel whose skills are required in the vocational rehabilitation of disabled persons.

In the initial phases of the program, Federal grants have gone to educational institutions to help meet part of the cost of establishing or expanding curriculums in the shortage fields. Grants also have been made to individuals in such areas as social work, occupational therapy, psychology, nursing, rehabilitation center direction, rehabilitation counseling, medicine, and work with the visually and aurally handicapped.